Record Nr. UNINA9910298354103321 Autore Brown Kristy A Titolo Obesity and breast cancer: the role of dysregulated estrogen metabolism / / Kristy A. Brown, Evan R. Simpson New York:,: Springer,, 2014 Pubbl/distr/stampa **ISBN** 1-4899-8002-4 Edizione [1st ed. 2014.] Descrizione fisica 1 online resource (ix, 56 pages): illustrations (chiefly color) Collana SpringerBriefs in Cancer Research, , 2194-1173 Disciplina 572.6 616.99/4071 Soggetti **Enzymes** Breast - Cancer - Etiology Breast - Cancer - Risk factors Metabolism - Disorders Obesity Oncology Lingua di pubblicazione Inglese **Formato** Materiale a stampa Livello bibliografico Monografia Note generali Description based upon print version of record. Nota di bibliografia Includes bibliographical references. Nota di contenuto Introduction -- Estrogens, adiposity and the menopause -- The link between obesity and breast cancer: Epidemiological evidence --Adipose-derived and obesity-related factors and breast cancer --Estrogen biosynthesis -- Therapies aimed at breaking the linkage between obesity and breast cancer -- Conclusions. Sommario/riassunto Obesity is a risk factor for breast cancer in older women. A number of adipose-derived and obesity-related factors have been shown to affect tumour cell growth. These include adipokines, insulin, IGF-1 and oestrogens. The majority of obesity-related postmenopausal breast cancers are oestrogen-dependent. Since the ovaries no longer produce oestrogens after menopause, and that circulating levels are negligible. it is evident that it is the oestrogens produced locally within the breast adipose that are responsible for the increased growth of breast cancer cells. Aromatase is the enzyme that converts androgens into oestrogens and its regulation is dependent on the activity of a number

of tissue-specific promoters. Targeting oestrogen biosynthesis in obesity may be useful for the prevention of breast cancer. Aromatase

inhibitors are efficacious at treating postmenopausal breast cancer and recent studies suggest that they may also be useful in the prevention setting. However, these compounds inhibit the catalytic activity of aromatase and as a consequence lead to a number of undesirable side-effects, including arthralgia and possible cognitive defects due to inhibition of aromatase in the bone and brain, respectively. Novel therapies, such as those employed to treat obesity-associated disease, including anti-diabetics, may prove successful at inhibiting aromatase specifically within the breast. This SpringerBrief will explore all of these issues in depth and the authors are in a unique position to write about this topic, having extensive experience in the field of aromatase research.